State of Hawaii Department of Human Services Benefits, Employment & Support Services Division Employment & Child Care Program Office

Addendum 5

November 10, 2008

To

Request for Proposals

HMS 903-09-01-S
Temporary Assistance for Needy Families (TANF) Purpose One Through Four
Services
September 8, 2008

November 10, 2008

ADDENDUM NO. 5

To

REQUEST FOR PROPOSALS Temporary Assistance for Needy Families (TANF) Purpose One Through Four Services

HMS 903-09-01-S

The Department of Human Services, Benefit, Employment & Support Services Division, Employment & Child Care Program Office is issuing this addendum to HMS 903-09-01-S, Temporary Assistance for Needy Families (TANF) Purpose One Through Four Services for the purposes of: Responding to questions that arose at the orientation meeting of <Date> and written questions subsequently submitted in accordance with Section 1-V, of the RFP. \boxtimes Amending the RFP. Final Revised Proposals The proposal submittal deadline: X is amended to December 1, 2008 is not amended. for Final Revised Proposals is <date>. Attached is (are): A summary of the questions raised and responses for purposes of clarification of the RFP requirements. 冈 Amendments to the RFP. Details of the request for final revised proposals. If you have any questions, contact:

U'ilani Hayes

Department of Human Services HMS 903-09-01-S Addendum No. 5

(808) 586-7088 ghayes@dhs.hawaii.gov Department of Human Services Benefit, Employment & Support Services Division Employment & Child Care Program Office 820 Mililani Street, Suite 606 Honolulu, HI 96813 HMS 903-09-01-S Temporary Assistance for Needy Families (TANF) Purpose One Through Four Services is amended as follows:

Subsection Page

Section 1, Service Specifications

(I) 1-1

The submittal deadline for proposals is amended to December 1, 2008. There will be no option exercised for discussions with applicant after proposal submittal deadline or submittal of Final revised proposals. Below is the amended Revised

Procurement Timetable.

I. **Procurement Timetable**

Note that the procurement timetable represents the State's best estimated schedule. Contract start dates may be subject to the issuance of a notice to proceed.

Activity	Scheduled
	<u>Date</u>
Public notice announcing Request for Proposals (RFP)	9/8/2008
Distribution of RFP	9/9/2008
RFP orientation session	9/16/2008
Closing date for submission of written questions for written responses	9/23/2008
State purchasing agency's response to applicants' written questions	9/30/2008
Discussions with applicant prior to proposal submittal deadline (optional)	N/A
Proposal submittal deadline	12/1/2008
Discussions with applicant after proposal submittal deadline (optional)	N/A
Final revised proposals (optional)	N/A
Proposal evaluation period	Weeks of
	12/2/2008 -
	12/12/2008
Provider selection	Week of
	12/15/2008 -
	12/17/2008
Notice of statement of findings and decision	12/17/2008
Contract start date	2/1/2009

		Addendum No. 5
Section 2, Service Sp	ecifications	
I (F		Amended to read "Total funding for this procurement is \$3,084,430.00, effective February 1, 2009."
II (E	E) 2-3	Amended to read "Initial term of contract: February 1, 2009 to January 31, 2010"
III (A) 2-4	Solicitation of service for TANF Purpose 1 which reads "Collaborative transitional living programs offered through agencies accredited by the council on accreditation on services for families and children throughout the state to assist TANF eligible youth head of households with dependent children who are runaway, homeless and street youth, and youth at risk of homelessness in all counties to enable these youth to learn skills essential for successful independent living." is moved to TANF Purpose 3.
		Solicitation of service for TANF Purpose 1 which reads "Program to expand computer literacy, training, life skills, and tutoring programs after school hours for disadvantaged youth and in the evenings for TANF eligible adults serving native Hawaiian, Pacific Island, and other ethnic groups living in Palolo Valley housing projects." Is moved to TANF Purpose 2.
III (E) (7) 2-8	Amended to read "Each service shall prepare and provide a monthly summary report based on their Milestone Achievement Form. Forms are specific to services provided. The Milestone Achievement Form shall detail, by participant and outcome objectives completed, the amount charged to the State for compensation.
IV (1) 2-10	Amended to read "Pricing shall be based on a Milestone Payment System (See Section 3.V., Financial. The applicant shall submit a cost proposal on the

shall submit a cost proposal on the

appropriate budget forms listed in Section 3.V. that are provided on the SPO website (See Section 1, Page 1-2, Website Reference) and other financial requirements as stated in Section 3.V. The cost proposal shall be in accordance with Chapter 103F, HRS, Cost Principles for Purchases of Health and Human Services in form, , SPO-H-201 provided on the SPO website."

IV (2) 2-10

Amended to read: (Refer to the table below)

TANF Purpose 1:

Program to assist at least 40 native Hawaiian TANF eligible families on the Leeward coast to succeed at homeownership by providing classes in home repair, financial literacy and essentials of homeownership, and by providing access to reusable homebuilding materials.

Contract Cost	\$282,579.00			
	Milestone #1	\$	300.00	per activity (Max: \$1500)
	Conduct outreach - A	mini	mum of 5 a	ctivities per year.
	Milestone #2	\$	475.50	per family (Max \$37,000)
	Complete orient	tation	and home	assessment.
	Milestone #3	\$	475.50	per family (Max \$37,000)
	Qualify and	enrol	l eligible fa	amilies.
	Milestone #4	\$	2,130.00	per family (Max \$85,039)
Co	mplete inividual projec	t plan	to include	necessary workshops.
	Milestone #5	\$	2,130.00	per family (Max \$85,040)
Attend	and complete all work	shops	according	to individual project plan.
	Milestone #6	•	1,000.00	±
Solici	it materials to assist fan	nilies	with home	projects. (Max \$37,000)

TANF Purpose 2:

1. Program to expand computer literacy, training, life skills, and tutoring programs after school hours for disadvantaged youth and in the evenings for TANF eligible adults serving native Hawaiian, Pacific Island, and other ethnic groups living in Palolo Valley housing projects.

Cost \$253,055.00 Milestone

Milestone #1 **\$ 1,000.00** per activity (Max \$12000) Conduct a minimum of one outreach activity per month

Milestone #2 **\$ 100.00** per intake (Max \$27,600) Complete financial assessment per family

Milestone #3 \$ 75.00 per unduplicated child per month Complete 10 sessions per month of homework tutoring to improve grades.

Milestone #4 \$ 75.00 per unduplicated child per month
Complete 10 sessions per month computer literacy training to become computer
proficient

Milestone #5 \$ 100.00 per unduplicated child per month Complete reading, math, and writing program

Milestone #6 \$ 75.00 per unduplicated adult per month

Complete one session per week of computer training (4 sessions per month) to assist in

developing and/or improving work skills for employment.

Milestone #7 \$ 125.00 per unduplicated adult per month Complete job readiness training program with a finished resume for job search.

Unduplicated: unique participant/client serviced for the month

2. Program to provide for training stipends, equipment, food supplies and tuition for TANF eligible adults enrolled in culinary training and food service preparation program training sites in Hilo and Captain Cook on the island of Hawaii.

Contract Cost	\$132,000.00	
	Milestone #1 \$ 2,200.00	
	Enrollment of student in culinary arts program.	
	Milestone #2 \$ 3,080.00	
	Complete all classes of the culinary arts program	
	Milestone #3 \$ 3,520.00	
	Complete hands on training after the culinary arts program.	_

3. Training program for 38 TANF eligible adults to gain employment and economic self-sufficiency by participating in bio-tech tissue culturing projects for bio-diesel, bio-mass, and other agricultural products in the Hilo and lower and upper Puna districts on the island of Hawaii...

Contract Cost \$264,000.00

Milestone #1

\$ 1,390.00

Meet eligibility requirements and enrollment of student in bio-tech program.

Milestone #2

\$ 1,737.50

Complete of all bio-tech related training programs.

Milestone #3

\$ 1,737.50

Complete employment readiness workshop.

Milestone #4

\$ 2.085.00

Graduation from bio-tech program.

4. Assist 300 TANF eligible families on Kauai to rise above the poverty line toward self-sufficiency with outreach and other tax preparation assistance to claim the earned income tax credit.

Contract Cost \$ 74

\$ 74,800.00

Milestone

\$ 250.00

per employed TANF eligible

Complete tax preparation and file tax forms for EITC.

TANF Purpose 3 and 4

1. Program that offers one-to-one mentoring after school and on weekends by matching caring volunteers to children and youth, largely from single parent households in Honolulu, who are considered at risk and need positive adult role models.

Contract Cost	\$	390,72	0.00		
Minimum	Have	25 und	uplicat	ed students	that participate a minimum of 5 hours of
Requirements				activ	ity each month
]	Milesto	one #1	\$	130 24	per child (Max

\$ 130.24 \$39,072)

Complete assessment and intake of youth. (300 individuals)

per adult (Max

Milestone #2 \$ 130.24 \$39,072)

Complete assessment and intake of adult. (300 individuals)

Milestone #3 per match (Max \$78,144)

Match child with appropriate adult for one-on-one mentoring services. (300 matches)

Milestone #4 \$ 19,536.00 per month (Max \$234,432)

Conduct match monitoring report on a monthly basis.

2. Program that offers positive youth development services in the County of Hawaii to 3rd and 4th graders especially under-achievers and their families with structured extracurricular civic learning activities in an after-school setting.

Contract Cost \$ 314,252.00

Milestone #1 \$

Enroll student and co

200.00 per student (Max \$40,000)

Enroll student and complete intake. (200 students)

Milestone #2 \$ 371.38 per student (Max \$74,275.60)

Complete initial assessment (pre-test) for each enrolled student. (200 students)

Milestone #3 \$ 52.38 per unduplicated child per month

Complete 20 hours per month of language and social skills curriculum. (100 students)

Milestone #4

\$ 31.43 per unduplicated child per month

Complete 10 hours per month of multicultural awareness activities. (100 students)

Milestone #5 \$ 20.95 per unduplicated child per month

Complete 10 hours per month of civic education. (100 students)

Milestone #6 \$ 371.38 per student (Max \$74,275.60)

Complete final assessment (post-test) for each enrolled student. (200 students)

3. Collaborative transitional living programs offered through agencies accredited by the council on accreditation on services for families and children throughout the state to assist TANF eligible youth head of households with dependent children who are runaway, homeless and street youth, and youth at risk of homelessness in all counties to enable these youth to learn skills essential for successful independent living.

Contract Cost \$ 444,430.00

Milestone #1 \$ 1,000.00 per outreach activity (Max \$12,000)

Conduct outreach activities

Milestone #2 **\$ 487.56** per intake (Max \$82,886)

Complete intake and assessment of participant. (170 participants)

Milestone #3 \$ 487.56 per intake (Max \$82,886)

Complete individualized service plan with a minimum of two service activities. (170 participants)

Milestone #4 \$ 22,221.50 per month (Max \$266,658)

Participants must complete the monthly required hours of participation as designated by the service provider to be the minimum number of hours needed to complete the activity in at least two of the four activities listed: academic support, service learning/job preparation, family planning services, or life skills training.

IV (3) 2-11 Amended to read:

"The Provider shall submit a monthly Summary Report and Milestone Achievement Form specifying the services provided and milestones achieved according to the Agreement.

Payments shall be made in monthly installments upon the monthly submission of the Summary Report and Milestone Achievement Form. The Milestone Achievement Form shall include the Provider's name shown in the Agreement, the Agreement number, and a detailed breakdown of milestones achieved for the monthly installment. All milestone costs shall not exceed total costs listed in the Agreement.

The Provider shall also provide quarterly copies of Subgrantee's Invoice and Expenditure Report (hereinafter SIER) in triplicate (an original and two copies). The SIER shall contain expenditures actually incurred for the performance of the services and a certification of compliance for the preceding quarter.

Final settlement shall include submission and acceptance of all reports and other materials to be submitted by the Provider to the State, resolution of all discrepancies in performance of service

Compensation shall be based upon the approved budget(s) for February 1, 2009 to January 31, 2010.

Section 3, Proposal Application Instructions

V(A.1)

3-3

1. Pricing Structure Based on **Milestone Payment System**

DHS will use a Milestone Payment System that will be based on milestones required in Section 2, IV. 2. Units of service and unit rate. The total amount requested based on the estimated number of clients to be served under that Milestone Payment System should match the total budget amount submitted in the required SPO-H budget forms.

Section 4, Proposal Evaluation No Changes Section 5, Attachments

List of Attachments

- 1. Summary Report Form (per service)
- 2. Milestone Achievement Form (per service)

A meeting will be held with interested parties regarding the current changes to the Request for Proposal as listed in this addendum.

Date:

November 13, 2008

Time:

9:00 - 11:00am

Location:

Benefit, Employment and Support Services Division

820 Mililani Street, Suite 606 Honolulu, HI 96813

Applicants may submit questions to the RFP Contact Person identified in Section 2 of this RFP. All written questions will receive a written response from the state purchasing agency.

Deadline for submission of written questions:

Date:

November 13, 2008

Time:

4:30pm

HST

State agency responses to applicant written questions will be provided by:

Date:

November 18, 2008

TANF Purpose 1

Monthly Performance Measures and Reimbursement Report

Contract Cost

\$ 282,579.00

Report Period January 1 - January 31, 2009

Program Description

Program to assist at least 40 native Hawaiian TANF eligible families on the Leeward coast to succeed at homeownership by providing classes in home repair, financial literacy and essentials of homeownership, and by providing access to reusable

homebuilding materials.

Milestone #1	300.00 per activity (Max:	\$1500)
Milestone Description	Conduct outreach	- A minimum of 5 activities per year.

Title of Outreach Activity	Date of Activity	Number attended
Name	Date	No. of people attending
Name	Date	No. of people attending
Name	Date	No. of people attending
Name	Date	No. of people attending

Number of activities for the month

Amount requested

1,200.00

Milestone #2	\$ 475.50 per family (Max \$37,000)	
Milestone Description	Complete orientation and home assessment.	

Client Name	Orientation Date	Assessment Date
Name	Date	Date

Number of clients for the month

Amount requested

\$ 1,902.00

Milestone #3	\$ 475.50 per family (Max \$37,000)
	Qualify and enroll eligible families.
Description	

Client Name	Qualification Date	Enrollment Date
Name	Date	Date

Number of clients for the month

Amount requested

\$ 1,902.00

Department of Human Services

Benefit, Employment and Support Services Division HMS 903-09-01-S

TANF Purpose 1

Monthly Performance Measures and Reimbursement Report

Milestone #4	\$ 2,130.00 per family (Max \$85,039)
Milestone Description	Complete inividual project plan to include necessary workshops.

Client Name Plan Date		Workshops to Attend		
Name	Date	Workshop Names		
Name	Date	Workshop Names		
Name	Date Workshop Names			
Name	Date	Workshop Names		

Number of plans for the month

Amount requested \$ 8,520,00

Milestone #5	\$ 2,130.00 per family (Max \$85,039)	
Milestone Description	Attend and complete all workshops according to individual project plan.	

Client Name	Completion Date
Name	Date
Name	Date
Name	Date
Name Date	

Number of clients for the month

Amount requested

4
\$ 8,520.00

Milestone #6	\$ 1,000.00 per solicitation of donor (Max \$37,000)
Milestone	Solicit materials to assist families with home projects.
Description	

Donor's Name	Date Contacted	Were goods donated?	If yes, what type of goods?	
Name	Date	Yes/No	Types of goods	
Name	Date	Yes/No	Types of goods	
Name	Date	Yes/No	Types of goods	
Name	Date	Yes/No	Types of goods	

Number of solicitations for the month

Amount requested

4 \$ 4,000.00

TOTAL AMOUNT REQUESTED

\$ 26,044.00

Department of Human Services
Benefits, Employment and Support Services Division
Employment and Child Care Program Office
Milestone Achievement From

RECIPIENT ORGANIZATION [Agency Name]

PROGRAM [Service Type]

Contract Number DHS-09-BESSD-XXXX

Report Period

3/1/09 - 3/31/09

300.00 \$ 3,081.00 \$ 1,000.00 \$ 1,000.00 \$ 2,130.00 \$7,511.00 Amount Requested \$1,000 \$1,000 Solicitation \$1,000 \$1,000 o ¥ 3/18/09 40/87 1/31/09 3/20/09 Contact \$1000 D ¥ Project End Date \$2,130 Previous Request \$2,130 \$2,130 5 ₹ 3/20/09 Project Start Date 3/30/09 1/30/09 \$475.50 \$475.50 Previous Request 3/16/09 \$475.50 PAY 2/27/09 Enrollment Date 1/15/09 \$475.50 \$475.50 Previous Request \$475.50 P 4 1/13/09 2/27/09 3/12/09 ssessmer Date 900.00 \$300.00 \$300.00 Previous Request Wilestone #1 \$300.00 ₽¥ 5/26/09 3/30/09 1/12/09 Activity Date Outreach - February 2009 Outreach - January 2009 Client Name or Activity Title Outreach - March 2009 Hardware Hawaii Home Depot Mark Marks John Doe Lani Moo John Doe City Mill Kilgo's

I certify to the best of my knowledge and belief that this report is true in all respects and that all services have been performed for the purpose and conditions of the grant agreement. CERTIFICATION:

PHONE Program Specialist Review Date TITLE DATE PRINT NAME SIGNATURE

Contract Tota	\$282,579.00
YTD Peakd	\$14,143.00
Remaining Fu	\$268,436,00

TANF Purpose 3 - Positive Youth Development Monthly Performance Measures and Reimbursement Report

Contract Cost

\$ 253,055.00

Report Period

January 1 - January 31, 2009

Program Description

Program to expand computer literacy, training, life skills, and tutoring programs after school hours for disadvantaged youth and in the evenings for TANF eligible adults serving native Hawaiian, Pacific Island, and other ethnic groups living in Palolo Valley housing projects.

Milestone #1	\$ 1,000.00 per activity (Max \$12,000)	
Milestone Description	Conduct a minimum of one outreach activity per month	

Title of Outreach Activity	Date of Activity	Number attended
Name	Date	No. of people attending
Name	Date	No. of people attending
Name	Date	No. of people attending
Name	Date	No. of people attending

Number of clients for the month Amount requested

\$ 4,000.00

Milestone #2	\$ 100.00 per intake (Max \$27,600)
Milestone	Complete intake and financial assessment per family (276 families)
Description	

Client Name		Date of Intake	
Name	Date		
Name	Date		
Name	Date		
Name	Date 🔎		▼

Number of olients for the month

Amount requested

\$ 400.00

Milestone #3	\$ 75.00 per unduplicated child per month (Max \$45,000)
Milestone	Complete 10 sessions per month of homework tutoring to improve grades. (50
Description	students per month)

	The state of the s			
Client Name	Monthly Start Date	Monthly End Date	Monthly Hours Completed	# of Sessions Completed
Name	Date	Date	# of hrs	# of sessions
Name	Date	Date	# of hrs	# of sessions
Name	Date	Date	# of hrs	# of sessions
Name	Date	Date	# of hrs	# of sessions

Number of clients for the month

Amount requested

\$ 300.00

Milestone #4	\$	75.00	per unduplicated child per month (Max \$45,000)
	•		por anadproduced or ma por mortar (max \$\psi\$ 10,000)

TANF Purpose 3 - Positive Youth Development Monthly Performance Measures and Reimbursement Report

I	Complete 10 sessions per month computer literacy training to become computer proficient (50 students per month)

Client Name	Monthly Start Date	Monthly End Date	Monthly Hours Completed	# of Sessions Completed
Name	Date	Date	# of hrs	# of sessions
Name	Date	Date	# of hrs	# of sessions
Name	Date	Date	# of hrs	# of sessions
Name	Date	Date	# of his	# of sessions

Number of clients for the month

Amount requested

\$ 300.00

Milestone #5	\$ 100.00 per unduplicated child/adult per month (Max \$60,000)	100
Milestone	Complete reading, math, and writing program (50 attendees per month)	
Description		

Client Name	Monthly Start Date	Monthly End Date	Monthly Hours Completed
Name	Date	Date	# of hrs
Name	Date	Date	# of hrs
Name	Date	Date	# of hrs
Name	Date	Date	# of hrs

Number of clients for the month

Amount requested

\$ 400.00

Milestone #6	\$ 75.00 per unduplicated adult per month (Max \$45,000)
	Complete one session per week of computer training (4 sessions per month) to assist
Description	in developing and/or improving work skills for employment. (50 adults per month)

Client Name	Session #1 Date	Session #2 Date	Session #3 Date	Session #4 Date
Name	Date	Date	Date	Date
Name	Date	Date	Date	Date
Name	Date	Date	Date	Date
Name	Date	Date	Date	Date

Number of clients for the month

Amount requested

\$ 300.00

Milestone #7 \$	125.00 per unduplicated adult per month (\$18,500)
Milestone Cor	mplete job readiness training program with a finished resume for job search. (148
Description adu	ults total)

Client Name	Job Readiness Start Date	Job Readiness End Date	Resume?
Name	Date	Date	Yes/No
Name	Date	Date	Yes/No

TANF Purpose 3 - Positive Youth Development Monthly Performance Measures and Reimbursement Report

Name	Date	Date	Yes/No
Name	Date	Date	Yes/No
Numb	er of clients for the	month	4

Amount requested

\$ 500.00

TOTAL AMOUNT REQUESTED

\$ 6,200.00



Department of Human Services
Benefits. Employment and Support Services Division
Employment and Child Care Program Office
Measone Achievement From

RECIPIENT ORGANIZATION [Agency Name]

PROGRAM [Service Type]

Contract Number DHS-09-BESSD-XXXX

Report Period

3/1/09 - 3/31/09

		Wilestone #1	1.0		CE SPONSON STATE			Saferia BX		NAME OF TAXABLE PARTY.	TONG EA	The second second	Milos	SETONO ES		Allegione BE	THE PER		Milestane			1
	\$1000	/	Outreach	\$10	S100 / Family	ully	8775	/ Child		S775 /	Child		1 0018	Individual		/ 572	Adult	155	\$125 /	Adult		
Client Name/Activity Name	Activity Date	TO PAY	Previous Request	hrtake Dete	TO PAY	Previous Request	Month End Date	07 YA	Previous Mo Request	Month End 1 Date P	TO Previous PAY Request	ous Month End	End TO		Previous Training Request End Date	ung TO	Previous	Training St End Date	TO	Previous Request	Amount Requested	pested
Outreach - January 2009	1/10/09		\$ 1,000.00									30000							<u></u>		₩	.
Lani Moo				1/12/09		\$ 100.00												1/30/09		\$125.00	69	
Lani Moo															2/13/09	9	\$ 75.00	0			€9	
Lei Moo							1/23/09	₩	\$ 75.00	1/23/09	\$ 75.00	00									↔	,
Lei Moo							2/27/09	₩	\$ 75.00			2/27/09	60/	\$ 100.00	00.0						₩.	
Lei Moo							3/27/09 \$7	75.00	8	3/31/09 \$ 75.00	5.00	3/20	\$/20/09 \$ 100.00								\$ 25	250.00
Outreach February 2009	2/3/09		\$ 1,000.00																		so	
John Doe				2/7/09		\$ 100.00															ω	
John Doe										-	4		4	-	3/12	3/12/09 \$ 75.00	8	3/30/09	####		\$ 12	125.00
Jack Doe							2/27/09	↔	\$ 75.00		4	2/27/09	60/	\$ 100.00	00.0						s	
Jack Doe							3/27/09 \$ 7	75.00	Ö	3/27/09 \$7	\$ 75.00	3/27/09	00:00:00	8							\$ 25	250.00
Outreach - March 2009	3/9/09	3/9/09 \$1,000.00																			\$ 1,00	1,000.00
Mark Marks				3/8/09 \$ 100.00	100.00				7									3/31/09	###		\$ 22	225.00
Maria Marks							3/27/09 875,00	75,00	<i>8</i>	3/27/09 \$ 75.00	5.00	3/27/09	00.00/	00:					-		\$ 25	250.00
																					•	
																					₩	Ι.
									4													
						No.	4					_				-					49	١.
	Total for R	Total for Milestone #1	3,000.00	Total for Mil.	sations #2	9 300.00	Total for Miles	S (12 dist)	480.00	Total for Milanton	X	300.00 Tota	of for Milestons	S100 8 2210		Total for Milestone #6	H	150.00 Total for	Allestone 97	\$ 376.00		
	Max for M		12,000.00	Max for Mile	matrices P.2	00'000'IZ 8	Max for Mines	B 10 10 10 10 10 10 10 10 10 10 10 10 10	07'00'51 8	May for Milaston	00'000'55 8 45'000'00	00'00	t for Wilestons 8	2 2000	es.coc.to	Max for Milestone 80		1.00 Max for	Milestone 67	18,500.00		
			1													F	SUBIO	SUBTOTAL/TOTAL AMOUNT REQUESTED	AMOUNT R	EQUESTED	\$2,100.00	3

CERTIFICATION: I certify to the best of my knowledge and belief that this report is true in all respects and that all services have been performed for the purpose and conditions of

Ē.		
TITLE	Program Specialist	DATE Review Date
PRINT NAME		SKGNATURE

AND AND	45.00,000,000
CTD Paid	\$5,075.
Jemaining Fu	\$247.980 (

TANF Purpose 3 - Positive Youth Development Monthly Performance Measures and Reimbursement Report

Contract Cost

\$ 132,000.00

Report Period

January 1 - January 31, 2009

Program Description

Program to provide for training stipends, equipment, food supplies and tuition for TANF eligible adults enrolled in culinary training and food service preparation program

training sites in Hilo and Captain Cook on the island of Hawaii.

Milestone #1	\$ 2,200.00 per student (Max \$33,000)	
Milestone Description	Enrollment of student in culinary arts program.	

Client Name		Date of Enrollment	THE STATE OF
Name	Date		

Number of clients for the month Amount requested

Milestone #2 \$ 3,080.00 per student (Max \$46,200)

Milestone Complete all classes of the culinary arts program

Description

Client Name	Date Classes Completed
Name	Pate
Name	Date
Name	Date
Name	Date

Number of clients for the month

Amount requested

\$ 12,320.00

8,800.00

Milestone #3	\$ 3,520.00 per student (Max \$52,800)
	Complete hands on training after the culinary arts program.
Description	

Client Name	Completion Date of Training
Name	Date

Number of clients for the month

Amount requested

\$ 14,080.00

TANF Purpose 3 - Positive Youth Development Monthly Performance Measures and Reimbursement Report

TOTAL AMOUNT REQUESTED

\$ 35,200.00



Department of Human Services
Benefits, Employment and Support Services Division
Employment and Child Care Program Office
Missione Achievement Form

RECIPIENT ORGANIZATION [Agency Name]

PROGRAM [Service Type]

Contract Number Report Period

3/1/09 - 3/81/09

		Wilestone #2			Wilestone			Milestone #4			_
	\$2	200 /	lent	83	,080 / Student	lent	53	250 / Stud	dent		
Enrollment	nent	5	Previous	Class	5	Previous	Training End	5	Previous	Amount Requested	
Date	9	PAY	Request	Date	PAY	Request	Date	PAY	Request		1
1/12	1/12/2009		\$2,200.00							69	1
				2/15/2009		\$3,080.00				92	
							3/30/2009	\$3,250.00		3,950.00	1
2/2	2/28/2009		\$2,200.00							da da	
				3/13/2009	\$3,080.00		3/31/2009	\$2,250.00		\$ 6,330.00	
3/1	3/15/2009	\$2,200.00								\$ 2,200.00	
									4	- \$	
										w	•
										la	
										•	
										\$	
										\$	
								•		·	
										-	
										s	
							<u> </u>			\$	
	Annual Property of the Parket									-	
1								**********		- \$	
	otal for M	Elestone v2	00'009'98	Total for Mile	estore 13	\$4,160.00	Total for Mil	Ostone 64	\$6,500.00		
						ins	BTOTAL/TOT	AL AMOUNT	SUBTOTAL/TOTAL AMOUNT REQUESTED	\$11,780.00	

|--|

SUBTOTAL/TOTAL AMOUNT REQUESTED

SUBTOTAL/TOTAL AMOUNT REQUESTED

have been performed for the purpose and conditions of the grant agreement.

	PHONE	Program Specialist	Review Date	
		10		
	TITLE		DATE	
-				
-				
1				
		1		
	PRINT NAME		SIGNATURE	

Monthly Performance Measures and Reimbursement Report

Contract Cost

\$ 264,000.00

Report Period

January 1 - January 31, 2009

Program Description

Training program for 38 TANF eligible adults to gain employment and economic self-sufficiency by participating in bio-tech tissue culturing projects for bio-diesel, bio-mass, and other agricultural products in the Hilo and lower and upper Puna districts on the island of Hawaii.

Milestone #1	\$ 1,390.00 per student (Max \$52,820)
Milestone Description	Meet eligibility requirements and enrollment of student in bio-tech program.

Client Name		Date of Intake	
Name	Date		1
Name	Date		
Name	Date		1
Name	Date		316

Number of clients for the month Amount requested

\$ 5,560.00

Milestone #2	\$ 1,737.50 per student (Max \$66,025)
Milestone Description	Complete of all bio-tech related training programs.

Client Name	Worl	shop Start Date	Workshop	p Completion Date
Name		Date		Date
Name	1	Date		Date
Name		Date		Date
Name		Date		Date

Number of clients for the month

Amount requested

\$ 6,950.00

\$ 1,737.50 per student (Max \$66,025)	
Complete employment readiness workshop.	

Client Name	Workshop Start Date	Workshop Completion Date
Name	Date	Date
	1 2 4 11 12 4 11	TO SECULE SECTION SECULE

Number of clients for the month

Amount requested

\$ 6,950.00

Milestone #4 \$ 2,085.00 per student (Max \$79,130)

TANF Purpose 2

Monthly Performance Measures and Reimbursement Report

Milestone Description	Graduation from bio-tech program.

Client Name		Graduation Date
Name	Date	
· · · · · · · · · · · · · · · · · · ·	Number of clients for the month	1

Number of clients for the month

Amount requested

\$ 8,340.00

TOTAL AMOUNT REQUESTED

\$ 27,800.00

Department of Human Services
Benefits, Employment and Support Services Division
Employment and Child Care Program Office
Miestone Achievement Form

RECIPIENT ORGANIZATION [Agency Name]

PROGRAM [Service Type]

Contract Number Report Period

	6120	#1200 / Enrollment	Ilmant	617	41737 En / Ch.	Chidant	68797	And I when	1	200	ORK / Stude		
Activity/Client Name or Report Period	Enrollment	2 2	Previous	Completion	102.5	evious	Completion	5 5	Previous	Graduation	유	Previous	Amount Requested
	Date		isanhau	Daid		reaches	Date		Markey	Cale	N.	Liednest	
Lani Moo	1/12/2009		\$1,390.00	1/31/2009		\$1,737.50							\$0.00
Lani Moo							2/12/2009		\$1,737.50				\$0.00
Lani Moo										3/13/2009	\$2,086,00		\$2,085.00
John Doe	2/2/2009		\$1,390.00	2/27/2009		\$1,737.50							\$0.00
John Doe							3/13/2009	\$1,737.50		¥			\$1,737.50
Mark Marks	3/20/2009	\$1,390.00		3/31/2009	\$1,737.50					28			\$3,127.50
													\$0.00
							4						\$0.00
											,		\$0.00
										3			\$0.00
													\$0.00
													\$0.00
													\$0.00
													\$0.00
													\$0.00
													\$0.00
													\$0.00
													\$0.00
	Total for Milestone #1 Max for Milestone #1	Total for Milestone #1 Max for Milestone #1	\$4,170.00	Total for Mile	estone r2	28.212.50 \$86,025.00	Total for Miles	fine #5	\$1,475.00	May for Mile	stone 14	FR.065.00	
									ร	JBTOTAL/TOT	TAL AMOUNT	SUBTOTAL/TOTAL AMOUNT REQUESTED	\$6,950.00
- TOTAL POLICE	- sadific to the	See of the last	tra carried and	4 bollodune th	of the state of	oodoor ile at	He sad that at	andoor					

CERTIFICATION: I certify to the best of my knowledge and belief that this report is true in all respects and that all services have been performed for the purpose and conditions of the grant agreement.

	\		
PRINT NAME		TITLE	PHONE
			Program Specialist
SIGNATURE		DATE	Review Date

THE R. P. LEWIS CO., LANSING, MICH.	
Contract Total	\$264,000.00
YTD Paid	\$14,942.50
Remaining Funds	\$249,057.50

Department of Human Services

Benefits, Employment and Support Services Division Employment and Child Care Program Office Milestone Achievement Form

<u>REC</u>	IPIEN'	<u> CORGANIZA</u>	<u>NOIT</u>
	Enter	Agonov Nom	_

Enter Agency Name

Report Period 3/1/09 - 3/31/09

PROGRAM EITC Tax Preparation - Kauai Contract Number DHS-09-BESSD-XXXX

0.000			Milesto	ne	
	Total Earned	\$250	1	Tax Filing	
Client Name/Client No.	Income Tax Credit	Filing Date	TO PAY	Previous Request	Amount Requested
ani Moo	\$2,356.00	1/15/2009	-	\$250.00	\$0.0
lohn Doe	\$4,500.00	1/23/2009		\$250.00	\$0.0
Mark Marks	\$1,600.00	2/25/2009		\$250.00	\$0.0
ane Smith	\$2,600.00	3/22/2009	\$250.00		\$250.0
	 	i			\$0.0
		i			\$0.0
		!	<u> </u>		\$0.0
		†			\$0.0
					\$0.0
	-				\$0.0
		i			\$0.0
		1			\$0.0
					\$0.0
					\$0.0
					\$0.0
					\$0.0
					\$0.0
					\$0.0
					\$0.0
					\$0.0
					\$0.0
				! !	\$0.0
					\$0.0
				 	\$0.0
					\$0.0
				T	\$0.0
					\$0.0
		Z			\$0.0
				0100 2011	\$0.0
					\$0.0
TOTAL	ITC \$11,056.00	YTD TOTAL	SPENT	\$1,000.00	发育是国际创办书 显
		CONTRACT	TOTAL	\$74,800.00	
		SUBTOTAL	TOTAL AMOU	JNT REQUESTED	\$250.00

CERTIFICATION: 1 certify to the best of my knowledge at services have been performed for	and belief that this report is true in all respects and that all reports and conditions of the grant agreement.
SIGNATURE	DATE
PRINT NAME	TITLE
Program Specialist	Date Reviewed

TANF Purpose 3 - Positive Youth Development Monthly Performance Measures and Reimbursement Report

Contract Cost

\$ 390,720.00

Report Period

January 1 - January 31, 2009

Program Description

Program that offers one-to-one mentoring after school and on weekends by matching caring volunteers to children and youth, largely from single parent households in

Honolulu, who are considered at risk and need positive adult role models.

Milestone #1	\$ 130.24 per youth intake (Max \$39,072)	THE REAL PROPERTY.	
Milestone Description	Complete assessment and intake of youth. (300 individuals)		

Client Name	Date of Intake
Name	Date
Name	Date
Name	Date
Name	Date 🛕

Number of clients for the month Amount requested

520.96

Milestone #2	\$ 130.24 per adult intake (Max \$39.072)
Milestone	Complete assessment and intake of adult. (300 individuals)
Description	

Client Name	Date of Intake
Name	Date

Number of clients for the month

\$ 520.96

Milestone #3	\$ 260.48 per match (Max \$78,144)
Milestone	Match child with appropriate adult for one-on-one mentoring services. (300 matches)
Description	

Name of Youth	Name of Mentor	Date of Match
Name	Name	Date

Number of clients for the month

Amount requested

\$ 1,041.92

Milestone #4	\$	
Milestone Description	Conduct match monitoring report on a monthly basis.	

TANF Purpose 3 - Positive Youth Development Monthly Performance Measures and Reimbursement Report

Reporting Period Attached Report	1/1/2009 - 1/31/2009 Yes/No	_
Office Use Only Report Verification Date Program Specialist		
	Amount requested	\$ 19,538.00
TOTA	L AMOUNT REQUESTED	\$ 21,619.84
7		

Department of Human Services
Benefits, Employment and Support Services Division
Employment and Child Care Program Office
Massons Achievment Form

PROGRAM [Service Type]

Contract Number Report Period

DHS-09-BESSD-XXXX 3/1/09 - 3/31/09

													9
	\$130	\$130.24 / V	Youth		TO 24 A. A.	duil.	103	In An I May	holy		Milestone #4	- Color	*
Chart Name/Client No.										İ	1000		Amount Bannathad
	Intake	TO PAY	Previous Request	Intake Date	TO YAY	Previous Request	Match	TO YAY	Previous Request	Report	TO PAY	Previous Request	
Lani Moo	1/29/2089		\$ 130.24									₩	
Monthly Report - Jan. 2009										1/2009		\$ 19,536.00 \$	
Jane Doe				2/20/2009		\$ 130.24						₩	
Monthly Report - Feb. 2009										2/2009		\$ 19,536.00 \$	1
Lani Moo/Jane Doe					4		3/5/2009 \$	\$ 260.48				₩.	260.48
Mark Marks	3/10/2004	130.24										49	
John Doe				3/16/2009	\$ 130 24							σ.	
Monthly Report - March 2009										3/2009	\$19,536.00	€9	19,536.00
												S	,
)									· 69	,
												₩	
												69	
				,			1						
								1				69	
												· •	,
						The state of the s					A	₩.	
						K						6	
					1							69	
	Total for Milestone #1 Max for Milestone #1		\$ 280.48 \$ 39,072.00	Total for Will	estans #2 mione #2	\$ 288,48 \$ 38,072,40	Total too Mile May for Wife	S C C C C C C C C C C C C C C C C C C C	78,544.00	Total he tel	S section 50	S 54,698.00	THE STATE OF
	GC:								ns	EMOTAL/TO	FAL AMOUNT	SUBTOTAL/TOTAL AMOUNT REQUESTED	\$20,056.96
CERTIFICATION: I certify to the best of my knowledge and belief that this repox by true in all respects and that all services have been performed for the purpose and conditions of the grant agreement.	N: I certify to the have been pe	e best of my orformed for t	knowledge and he purpose an	l belief that thi d conditions o	s reporter trails of the grant a	ue in all respec greement.	ts and that all	services					
	· 			'						1		Contract Total	\$390,720.00
PRINT NAME		F	TILE	Progr	PH(Program Specialist	PHONE ist				M	>1 K	YTD Paid Remaining Funds	\$59,389.44
				ŀ					1				

Program Specialist Review Date

TANF Purpose 3 - Positive Youth Development Monthly Performance Measures and Reimbursement Report

Contract Cost

\$ 314,252.00

Report Period

January 1 - January 31, 2009

Program Description

Program that offers positive youth development services in the County of Hawaii to 3rd and 4th graders especially under-achievers and their families with structured extracurricular civic learning activities in an after-school setting.

Milestone #1	\$ 200.00 per student (Max \$40,000)	
Milestone Description	Enroll student and complete intake (200 students)	

Client Name	Date of Intake	Name of School
Name	Date	School Name
N.I. man le	an of allows for the month	

Number of clients for the month Amount requested

800.00

Milestone #2	\$ 371.38 per student (Max \$74,275.60)
Milestone	Complete initial assessment (pre-test) for each enrolled student. (200 students)
Description	

Client Name	Test Date	Test Score
Name	Date	Score
Name	Date	Score
Name	Date	Spore
Name	Date	Score

Number of clients for the month

Amount requested

\$ 1,485.52

Milestone #3	\$ 52.38 per unduplicated child per month
	Complete 29 hours per month of language and social skills curriculum. (100
Description	students/month)

Client Name	Dates of Attendance	Hours completed for the month
Name	Date	Hours

Number of clients for the month

Amount requested

\$ 209.52

Milestone #4	31.43 per unduplicated child per month
In	Complete 10 hours per month of multicultural awareness activities. (100 students/month)

TANF Purpose 3 - Positive Youth Development Monthly Performance Measures and Reimbursement Report

Client Name	Dates of Attendance	Hours completed for the month
Name	Date	Hours

Number of clients for the month

Amount requested

\$ 125.72

Milestone #5	\$ 20.95 per unduplicated child per month	
Milestone	Complete 10 hours per month of civic education. (100 students/month)	
Description		

Client Name	Dates of Attendance	Hours completed for the month
Name	Date	Hours

Number of clients for the month Amount requested

•		83.80
- V		03.00
	1000	1000

Milestone #6	\$ 371.38 per student (Max \$74,275.60)
Milestone	Complete final assessment (post-test) for each enrolled student. (200 students)
Description	

Client Name	Test Date	Test Score
Name	Date	Score

Number of clients for the month

Amount requested

4 \$ 1,485.52

TOTAL AMOUNT REQUESTED

\$ 4,190.08

Department of Human Services
Benefits, Employment and Support Services Division
Employment and Child Care Program Office
Milestone Achievement Form

RECIPIENT ORGANIZATION [Agency Name]

PROGRAM [Service Type]

Contract Number DHS-09-BESSD-XXXX

Report Period ___

3/1/09 - 3/31/09

		CERTIFICATION:														Mark Marks	John Doe	John Doe	John Doe	Lani Moo	Lani Moo	Lani Moo		Cilent Name/Cilent No.
		agenty to the		Total for Milestone #1 Max for Milestone #1												1/12/2009			1/12/2009			1/12/2009	intake TO Date PAY	### ##################################
	PAINT NAME SIGNATURE	est or my know		\$ 40,000.00												\$ 200.00			\$ 200.00	-		\$ 200.00	Previous Request	Intake
		ledge and bell		Max for Milestone #2												1/28/2009			1/28/2009			1/28/2009	Pre-Test TO Date PAY	Milestone #2 \$371.38 / Pre-
	I	et that this rep		\$ 41,275.50												\$ 371.38			\$ 371.38			\$ 371.38	Previous Request	Pre-Test
	DATE	ort is true in all the		Total for Milestone Max for Milestone (\		3/31/2009 \$ 5	2/28/2009		3/31/2009 \$ 52.38	2/28/2009	1/31/2009	3/31/2009 \$ 52.38	2/28/2009	1/31/2009	Month End Date	\$52.38 / Stu
		in all respects and the the grant agreement.		\$ 419.04					4					\$ 52.38	\$ 52.38		2.38	\$ 52.38	\$ 52.38	2.38	\$ 52.38	\$ 52.38	TO Previous PAY Request	dent / Class
		that all service nt. 		Total for Milest Marc for Milest							4			3/31/2009	2/28/2009	W51/2009	3/3//2009	2/28/2009	1/31/2009	3/31/2009		1/31/2009	Month End Date	\$31.43 / S
Review Date	PHONE Program Specialist	s have been p		9 37,7									4	\$31.43	\$ 31	\$ 31	\$31.43	\$ 31	\$ 31	\$31.43		\$ 31	TO Previous PAY Request	Student / Cla
Date	sialist	erformed for th		251.44 Total for N						•	M	1		3/31/2009	31,48 2/28/2009	31.43 //81/2008	3/31/200	31.43 2/28/2009	31.43		2/28/2008	31.43 1/31/2009	ous Month End Bate	\$20.95 /
		e purpose and	SUBTO	Heatone #5 S										9 \$ 20.95			3/3/1/2009 \$ 20.95		(PAY	Student /
		conditions of	SUBTOTAL/TOTAL AMOUNT REQUESTED	146.65 Total for N 25,140.20 Max for M											\$ 20.95	\$20.95		\$ 20.95			\$ 20.95	\$ 20.95	Previous Post-Test Request Date	Class \$371.38
	圖出	ខ្ល	UNT REQUE	Total for Milestone #5 \$ 1																			TO PAY	Milestone #6
	Pernaining	Contract To	STED	\$ 74,275.60	€9	69	€9	€9	€9	€9	€9	€9	€9	co	69	\$	69	\$	€	59	€9	89	Previous Request	Test
	\$2,531.2 \$311,720.7	\$314,252.0	\$293.33							1	1			104.76			104.76		r	83.81	,	 -	Requested	Amount

TANF Purpose 3 - Positive Youth Development Monthly Performance Measures and Reimbursement Report

Contract Cost

\$ 444,430.00

Report Period

January 1 - January 31, 2009

Program Description

Collaborative transitional living programs offered through agencies accredited by the council on accreditation on services for families and children throughout the state to assist TANF eligible youth head of households with dependent children who are runaway, homeless and street youth, and youth at risk of homelessness in all counties to enable these youth to learn skills essential for successful independent living.

Milestone #1	\$ 1,000.00 per outreach activity (Max \$12,000)	
Milestone Description	Conduct outreach activities	

Title of Outreach Activity	Date of Activity	Number attended
Name	Date	No. of people attending
Name	Date	No. of people attending
Name	Date	No. of people attending
Name	Date	No. of people attending

Number of clients for the month Amount requested

4,000.00

Milestone #2	\$ 487.56 per intake (Max \$82,886)
Milestone	Complete intake and assessment of participant. (170 participants)
Description	

Client Name	Intake/Assessment Date
Name	Date

Number of clients for the month

Amount requested

4 3 1,950.24

Milestone #3	\$ 487.56 per plan (Max \$82,886)
	Complete individualized service plan with a minimum of two service activities. (170
Description	participants)

Client Name	Plan Start Date	Plan Activities
Name	Date	List of activities with required hours of participation
Name	Date	List of activities with required hours of participation
Name	Date	List of activities with required hours of participation
Name	Date	List of activities with required hours of participation

Number of clients for the month

Amount requested

22,221.50 per month (Max \$266,658)

\$ 1,950.24

Milestone #4

TANF Purpose 3 - Positive Youth Development Monthly Performance Measures and Reimbursement Report

Description	Participants must complete the monthly required hours of participation as designated by the service provider to be the minimum number of hours needed to complete the activity in at least two of the four activities listed: academic support, service learning/job preparation, family planning services, or life skills training.
	3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,

Client Name	Service Activity	Hours Required	Hours Completed
Participant #1	Service Activity	# of hrs req.	# of hrs cmplt.
Participant #1	Service Activity	# of hrs req.	# of birs couplt.
Participant #2	Service Activity	# of hrs req.	# of hrs cmplt.
Participant #2	Service Activity	# of hrs req.	# of hrs cmplt.

Number of clients compliant for the month

Amount requested

\$ 22,221.50

TOTAL AMOUNT REQUESTED

\$ 30,121.98

Department of Human Services
Benefits, Employment and Support Services Division
Employment and Child Care Program Office
Miestone Achievement Form

RECIPIENT ORGANIZATION [Agency Name]

PROGRAM [Service Type]

Contract Number Report Period

		Tillactons #7			THE STATE OF THE S			The state of the s			The second second			Γ
	\$10	\$1000 / Activity	ctivity	54	\$487.56 / Int	Intake	548	87.56 / Pla	-	\$22,2	221.50 / Mc	Month	•	
Activity Circuit Name of Report	Activity	TO YAY	Previous Request	Intake	TO PAY	Previous	Plan	0 A Y	Previous	Report	TO PAY	Previous	Amount Requested	-
Outreach Activity - Jan 2009	1/15/2009]	\$ 1.000.00											
Lani Moo				1/16/2009		\$ 487.56	1/16/2009	₩	\$ 487.56				· •	
Monthly Report - Jan. 2009									4	1/2009		\$ 22,221.50		
Outreach Activity - Feb. 2009	2/5/2009		\$ 1,000.00						7			!		
John Doe				2/6/2009		\$ 487.56	2/9/2009	9	487.56				s	- 30
Monthly Report - Feb. 2009									, v	60022		\$ 22,221.50	\$	
Outreach Activity - Mar. 2009	3/2/2009	3/2/2009 \$ 1,000.00											1,000.00	9
Mark Marks				\$ 6002/01/8	\$ 487.56		3/15/2009	8	\$ 487.56				\$ 487.56	99
Monthly Report										3/2009	\$ 22,221.50		\$ 22,221.50	92
								4		4			69	
													6	
			Park I to the				1						s	l .
													s	
													s	
												•	s	
												•		
								**********				1.00	s	
	Total for Milestone #1	П	3,000.00	Total for Alls	estone #2	\$ 1,482.48 \$ 82.88.00	Total for Miles	atone #3	1,482.68	Total for Mile	astone s4	S 66,664.50		
	Max for me	7	12,000.00		BEIONE FZ		MAL NO. STORES	STATE OF THE PARTY	42,486.0U	TOT/ INTOTAL	TAI AMOINT	SUBTOTAL GOTAL AMOUNT BEOLIESTED	\$23 709 06	ď
									ì			1		7

CERTIFICATION: I certify to the best of my knowledge and belief that this report is true in all respects and that all services have been performed for the purpose and conditions of the grant agreement.

PRINT NAME	TITLE	PHONE
		Program Specialist
SIGNATURE	DATE	Review Date

Contract Total	\$444,430.00
YTD Paid	\$72,589.86
Remaining Funds	\$371,840.14